PATENT APPLICATION FEE DETERMINATION RECORD

. Effective October 1, 2003

Application or Docket Number lolol9643

CLAIMS AS FILED - PART I (Column 1)						•		SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Colui	(Coldinii 1)		(Column 2)		TYPE		OF		LENTITY
FOR			AULAGE	NUMBER ELLER		AN IMPED SYTEM		ATE	FEE		RATE	FEE
TOTAL CHARGEABLE CLAIMS			+	NUMBER FILED		NUMBER EXTRA		IC FEE	385.0		BASIC FE	F 770.00
			minus 20=		*		×	\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =				×	43=		OR	X86=	
MI	JLTIPLE DEPE	NDENT CLAIM I	PRESENT	ESENT				45=		OR	+290=	1
* If the difference in column 1 is less than zero						column 2	LTC	TAL	·	OR		
	2 14 0 CLAIMS AS AMENDED - PART II								<u> </u>			THAN
_	(Column 1)			(Colum		(Column 3)	SM	ALL	ENTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA	RA	ATE .	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE
	Total	2	Minus	** 4	0	=	X\$	9=		OR	X\$18=	
AME	Independent	ENTATION OF M	Minus				X4	3=		OR	X86=	
		ENTATION OF W	OLTIFIE DE	PENDENT	CLAIM		+14	15=		OR	+290=	
								OTAL		اا	TOTAL	· · · · ·
		ADDIT	. ret L		_	ADDIT. FEE	L					
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	RA	TE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT B	Total	.*	Minus	**		=	X\$	9=		OR	X\$18=	1
	Independent	*	Minus	***		= .	X4:	3=		1 1	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
								5=		OR	+290=	
							ADDIT.	FEE		OR A	TOTAL DDIT. FEE	
_	<u> </u>	(Column 1) CLAIMS	· · · · · · · · · · · · · · · · · · ·	(Column		(Column 3)						
ENTC		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	RAT		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
NON L	Total	*	Minus	st st		= .	X\$ 9)=	,	OR	X\$18=	<u> </u>
5 L	Independent	*	Minus	***		=	X43	_			X86=	· · · · · ·
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	_		OR -	∧ou=	
* If the entry in column 1 is less than the entry in column 2 with 100 in an in a less than the										+290=		
It	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." ADDIT. FEE OR AD											
T	ne *Highest Num	ber Previously Paid	For (Total or	Independent	is the h	nighest number t	found in th	e appro	priate box	in colur	nn 1.	·